
SOLUTION OVERVIEW

Unscramble Insurance Verification And Prior Authorization

REAL SOLUTIONS AUTOMATE THE PROCESS FOR THE LONG TERM

Let's face it: The insurance verification and prior authorization process is a mess.

Everyone involved feels the pain — your team, patients, and payers, too. Even with all those people trying their best, insurance verification and prior authorization is difficult to navigate.

That's often because we rely on humans to drive it all. To truly advance insurance verification and prior authorization, we need automation.

Staffing and manual work can hinder your progress

Lack of automation can weaken your insurance-related functions so that they're unable to adapt to day-to-day challenges. For example, if verification and authorization go off the rails whenever someone is out sick, you can lose revenue, time, and patients.

You need permanent solutions to these manual-process issues and more:

- Unnecessary denials
- Short-notice cancellations and reschedules
- Staffing levels
- Team training and proficiency
- Last-minute insurance verification and prior authorization
- Errors that come with manual processes

Adding staff might help you in the short term. More people might even help you catch up so you can work more than a few days ahead. But is it a real solution?

This approach becomes expensive, makes work unpredictable, and gives you little bang for your buck. It's a quick fix that reinforces inefficiencies, including a constant need to hire, train, and manage employees.

Rather than eliminating errors, adding more people increases mistakes and creates rework. Ongoing turnover and additional errors slow you down and rapidly increase your costs. If you want to improve the patient experience over the long term, adding more staff isn't the best way.

MUNDANE, REPETITIVE TASKS' BEST PACE IS STILL SLOW

For example, consider how you identify and initiate prior authorizations. It includes a person performing some or all of these activities:

- Verify benefits
- Investigate rules on payer's website
- Confirm requirement for prior authorization
- Contact the payer by phone
- Fill out a form to initiate the request
- Find and attach supporting documentation
- Follow up

Someone spends time on these tasks for every prior authorization. It's a ton of mundane work regardless of how big your team is. Typically, your staff runs through this process three to five days before a patient's appointment. By then, these routine tasks become urgent — which works for standard cases, when the rules are clear and the payer approves the authorization.

COMPLEXITY CAUSES EVEN MORE MISSED OPPORTUNITIES

What about when the provider receives partial authorization? What if the payer denies the request? How about when the payer's website contains outdated rules? Such cases can result in more phone calls and late cancellations. Then, the whole process begins again before the patient's rescheduled appointment.



Things grow even more complicated for complex services. Questions about medical necessity and cost-effective treatment can create more work, increase delays, and intensify communication with payers and patients.

When your processes rely on labor, you risk errors and inconsistent performance. All the steps take extra time, too. It all adds up to a poor experience for a patient, lost productivity, and missing out on revenue.

Automation solves all these problems. A 24/7 digital workforce reduces costs by increasing productivity and eliminating errors. You can enable your employees to work at the top of their skillsets when you reduce busywork and simple, repetitive tasks.

You see how automation can help your business improve operations. Now, where do you start?

SUTHERLAND CAN HELP YOU DEFINE A PATH TOWARD AUTOMATION

We don't just streamline or add staff to accelerate your processes — we use true automation. Built from the ground up for insurance verification and prior authorization, Sutherland's solutions meet you where you are. Let us tailor a solution that delivers the outcomes you need. You can shorten your time to payment and improve the patient experience with help from Sutherland's experts. Sutherland is your partner now and your guide for the future.

We make digital
human™

sutherlandglobal.com
sales@sutherlandglobal.com
1.585.498.2042



Sutherland is an experience-led digital transformation company. Our mission is to deliver exceptionally designed and engineered experiences for our customers and employees. For over 35 years, we have cared for our clients' customers, delivering measurable results and accelerating growth. Our proprietary, AI-based products and platforms are built using robust IP and automation. We are a team of global professionals, operationally effective, culturally meshed, and committed to our clients and to one another. We call it One Sutherland.